



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Donna Singleton, Treasurer
National Republican Congressional
Committee-Expenditures
320 First Street
Washington, DC 20003

APR 9 1997

Identification Number: C00075820

Reference: 12 Day Pre-General Report (10/1/96-10/16/96)

Dear Ms. Singleton:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Line 13 of the Detailed Summary Page of your report discloses a total of \$0 in All Loans Received. The sum of the entries itemized on Schedule C-1, however, indicates the total to be \$25,000. Please amend your report to clarify the discrepancy.

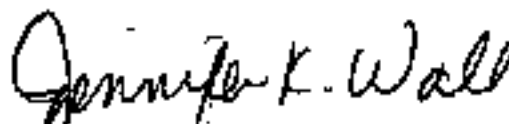
-Your report discloses a loan received on Schedule C-1 from Nationsbank, which has not been recorded on Schedule C. Loans and loan repayments received must be reflected on Schedule C as well as on Schedule A. Please amend your report to clarify this discrepancy. 2 U.S.C. §§434(b)(3)(E) and (5)(D)

-Your report discloses an outstanding balance(s) beginning this period for a debt(s) owed to Cellular One for \$5,845.75 and Federal Express Corporation for \$1,300.96. However, an outstanding balance(s) at the close of the period was not disclosed on your October Monthly Report (9/1/96-9/30/96). Please amend your report(s) to clarify this discrepancy.

-Please clarify the purpose and nature of the receipts from "Dittler Brothers, Incorporated" itemized on Schedule A supporting Line 15.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,

A handwritten signature in cursive script that reads "Jennifer K. Wall".

Jennifer K. Wall

Reports Analyst

Reports Analysis Division

The first part of the paper discusses the importance of understanding the cultural context of the research. It highlights the need for researchers to be sensitive to the values and beliefs of the communities they are studying. This is particularly important in the field of health research, where cultural differences can significantly impact the effectiveness of interventions.

The second part of the paper presents a review of the literature on cultural competence in health care. It examines the various models and frameworks that have been developed to guide the development of culturally competent health care providers. The review also identifies the challenges and barriers to achieving cultural competence in practice.

The third part of the paper describes the methodology used in the study. It details the selection of participants, the data collection methods, and the analysis techniques. The study was conducted in a community-based setting, and the participants were recruited through a snowball sampling method.

The fourth part of the paper presents the findings of the study. It discusses the themes that emerged from the data and the implications of the findings for the development of culturally competent health care. The findings suggest that there is a need for more training and education for health care providers on cultural competence, and that there is a need for more research on the effectiveness of interventions to improve cultural competence.

The fifth part of the paper discusses the limitations of the study and the implications for future research. It acknowledges the limitations of the study, such as the small sample size and the lack of a control group. It also discusses the implications of the findings for future research, such as the need for more research on the effectiveness of interventions to improve cultural competence.

The final part of the paper provides a conclusion and a summary of the key findings. It emphasizes the importance of understanding the cultural context of the research and the need for more training and education for health care providers on cultural competence.